

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Daniel Webster			2. Identification Number H0FL08208	
(b) Address (number and street) 3400 Old Winter Garden Road			<input type="checkbox"/> Check if address changed	
(c) City, State and ZIP Code Orlando FL 32805			3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)	
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate FL 08		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Daniel Webster for Congress		
(b) Address (number and street) 3400 Old Winter Garden Road		
(c) City, State and ZIP Code Orlando FL 32805		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) FL - 08 Nominee Fund		
(b) Address (number and street) 320 1st Street, S.E., Floor 2		
(c) City, State and ZIP Code Washington DC 20003		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate Daniel Webster	Date 09/22/2010
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NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Founders Joint Candidate Committee

(b) Address (number and street)

228 S. Washington Street, #115

(c) City, State and ZIP Code

Alexandria

22314
